

|   |   |  |
|---|---|--|
| <b>CLAIMS ONLY</b>  | SERIAL NO.<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">10016706</div> | FILING DATE<br><div style="border: 1px solid black; height: 20px; width: 100%;"></div> |
| APPLICANT(S)<br><div style="border: 1px solid black; height: 20px; width: 100%;"></div> |   |  |

| CLAIMS       |          |      |                     |      |                     |      |
|--------------|----------|------|---------------------|------|---------------------|------|
|              | AS FILED |      | AFTER 1st AMENDMENT |      | AFTER 2nd AMENDMENT |      |
|              | IND.     | DEP. | IND.                | DEP. | IND.                | DEP. |
| 1            |          |      |                     |      |                     |      |
| 2            |          |      |                     |      |                     |      |
| 3            |          |      |                     |      |                     |      |
| 4            |          |      |                     |      |                     |      |
| 5            |          |      |                     |      |                     |      |
| 6            |          |      |                     |      |                     |      |
| 7            |          |      |                     |      |                     |      |
| 8            |          |      |                     |      |                     |      |
| 9            |          |      |                     |      |                     |      |
| 10           |          |      |                     |      |                     |      |
| 11           |          |      |                     |      |                     |      |
| 12           |          |      |                     |      |                     |      |
| 13           |          |      |                     |      |                     |      |
| 14           |          |      |                     |      |                     |      |
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| 18           |          |      |                     |      |                     |      |
| 19           |          |      |                     |      |                     |      |
| 20           |          |      |                     |      |                     |      |
| 21           |          |      |                     |      |                     |      |
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| 47           |          |      |                     |      |                     |      |
| 48           |          |      |                     |      |                     |      |
| 49           |          |      |                     |      |                     |      |
| 50           |          |      |                     |      |                     |      |
| TOTAL IND.   |          |      |                     |      |                     |      |
| TOTAL DEP.   |          |      |                     |      |                     |      |
| TOTAL CLAIMS |          |      |                     |      |                     |      |

  

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| 51           |  |  |  |  |  |  |
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| 84           |  |  |  |  |  |  |
| 85           |  |  |  |  |  |  |
| 86           |  |  |  |  |  |  |
| 87           |  |  |  |  |  |  |
| 88           |  |  |  |  |  |  |
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| 91           |  |  |  |  |  |  |
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| 98           |  |  |  |  |  |  |
| 99           |  |  |  |  |  |  |
| 100          |  |  |  |  |  |  |
| TOTAL IND.   |  |  |  |  |  |  |
| TOTAL DEP.   |  |  |  |  |  |  |
| TOTAL CLAIMS |  |  |  |  |  |  |

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS